

**WESTERN REGIONAL MEETING OF THE FEDERATION OF STATE
PHYSICIAN HEALTH PROGRAMS**

Thursday, Friday and Saturday, September 21-23, 2006

**Ruby's Inn
1000 South Highway 63
Bryce Canyon, UT 84764
(866) 866-6616**

ATTENDEE REGISTRATION FORM (Type or Print)

Name: _____

Preferred on Name Tag: _____

Affiliation: _____

Title: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Telephone #: _____ **Fax #:** _____

Contact email Address: _____

Spouse/SO/Guest or 2nd Exhibitor Name: _____

Preferred on Name Tag: _____

Member Rate Before August 17, 2006:	\$175.00	_____
Non-Member Rate Before August 17, 2006:	\$200.00	_____
Spouse/SO: (Includes Meals)	\$175.00	_____
Exhibitor (2) (add \$125 for each additional person over 2)	\$500.00	_____
(Includes Meals)		
Add if After August 17, 2006: (each registrant)	\$25.00	_____
Non-registered guest for Friday Dutch Oven Dinner:	\$35.00	_____
CME 9.5 Credit Hours	\$40.00	_____

TOTAL REGISTRATION FEE: _____

Return completed form with payment to:

**URAP Western FSPHP Conference
160 East 300 South
POB 146741
SLC, UT 84114-6741**

Cancellation deadlines: Full refund less \$50 processing fee prior to August 21.
50% refund after August 21 and prior to September 6.
No refund after September 7.

**HOTEL RESERVATIONS: Ruby's Inn, (866) 866-6616, Identify with Western Federation
Physician Health Plans, group rate of \$88 guaranteed to August 21, 2006.**

All other inquiries, please call URAP (Debbie or Susan) (801) 530-6417 or 530-6428

dharry@utah.gov or shigggs@utah.gov

Fax: (801) 530-6511